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A	UTHORIZED	Telecommunication UTILITY REP		ATIVE FORM
	CER	TIFICATED COMPANY	INFORMATI	ON
Company Name: BCN Telecom, Inc.		FEIN/SSN		
DBA/FKA:		Bording (4 - 1956) - Andrew G. Anne (400 Albert Albert Anne Andrews (400 Albert Anne Andrews)	Telephone #	
Mailing Address: 10	07 W Michigan Ave, 4th	Floor	man disabel i antandris deriva pari susabayandir i saa ben di pismi di dalah sabi	
City: Kalamazoo		State: MI	The control of the second section is the second section of the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is the second section in the second section in the section is the section in	ZIP Code: 49007
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and in compression along the comprehension and compression and	R	EGISTERED AGENT IN	FORMATION	A control of the cont
Registered Agent:	B Aliston Moore Jr.		ing a colony during a colonic as subsection on a superior distribution of distribution and of subsection of the	
Mailing Address: 5	Exchange Street		THE RESIDENCE OF THE PROPERTY	
City: Charleston	y: Charleston State: SC ZIP Code: 49401		ZIP Code: 49401	

As required by Commission rules and regulations

Print or type company contact person and contact information for the areas listed below:

named and the state of the stat	UTILIT	Y REPRESENTATIVE INFORMAT	ION
General Manager	***************************************	ander van de set set hit ford an terminal de historia van folk in terminal en de historia de man de historia de set set un en terminal (1834 et se	
Name: Kathleen Gorey	and the state of t		
Address: 1200 Mt Kemble Avenue	, 3rd Floor		
City: Morristown	State: NJ		ZIP Code: 07960
Phone: 908-367-5600	Email: kgorey@bcntelec.com		Fax: 908-367-5960
Emergency Contact - Non	Office Hou	rs	
Name:	nated from the control of the contro		
Phone:	Email:		Fax:
Customer Relations/Comp	laints Rep		од от в не Авгания селиция селитория на предоставления селитория селитория на принципалний селит
Name: Ebony Knott	ette at traduce sudden er kulltydyddirethol i ei rei yn aeth ar eithad ei ar eithad e ei ar eithad e eil ar ei		
Address: 1200 Mt Kemble Avenue	, 3rd Floor		
City: Morristown	Marie Marie Consider. On 1999 Strange and Strange Strange and Strange Strange and Strange Stra	State: NJ	ZIP Code: 07960
Phone: 800-768-2852	Email: ekno	tt@bcntele.com	Fax: 908-367-5960
Complaints Rep for Complaints	aint Escala	tion	
Name: Ebony Knott	THE TRANSPORTER AND ALL REPORT OF SALES ASSESSED.		
Address: 1200 Mt Kemble Avenue	, 3rd Floor		
City: Morristown	Pire a Priladella auto ngilo coli i dil di Pire as Prilagelo d _a monesta e è meteri	State: NJ	ZIP Code: `07960
Phone: 800-768-2852	Email: eknot	tt@bcntele.com	Fax: 908-367-5960
Customer Toll Free Contac	t Number:	800-768-2852	
Engineering Operations	n Tarak ina Makapahanian phorosobrasian asigan manakai asiga manakai asiga manakai		
Name:	Pro British Condition of Conditions (Control of Conditions of Conditions)		
Address:			
City:		State:	ZIP Code:
Phone:	Email:	Fax:	
Test and Repair			
Name:			DECEIVEL
Address:			K
City:		State:	ZIP Code: MAD 9 0 2020
Phone:	Email:		Fax:

PSC SC MAIL / DMS

	UTILIT	Y REPRESENTATIVE INFORMATIO	N
Regulatory Officer			
Name & Title: Kathleen Gorey			
Address: 1200 Mt. Kemble Aven	ue, 3rd Floor		
City: Morristown		State: NJ	ZIP Code: 07960
Phone: 908-367-5600	Email: kgo	rey@bcntele.com	Fax: 908-367-5960
Annual Report Form Maili	ngs		
Name & Title: Amanda Gucich,	Senlor Compli	ance Specialist	
Address: 107 W Michlgan Ave, 4	th Floor		
City: Kalamazoo		State: MI	ZIP Code: 49007
Phone: 269-381-8888	Email: con	tact@nationwideregulatorycompliance.com	Fax: 269-381-4855
Dual Party Invoice Mailin	gs		
Name & Title: Amanda Gucich,	Senior Compl	liance S <u>peci</u> alist	
Address: 107 W Michigan Ave, 4	th Floor		The second of th
City: Kalamazoo		State: MI	ZIP Code: 49007
Phone: 269-381-888	Email: cont	act@nationwideregulatorycompliance.com	Fax: 269-381-4855
Universal Service Fund M	ailings		
Name & Title: Amanda Gucich,	Senior Compl	iance Specialist	
Address: 107 W Michigan Ave,	th Floor		
City: Kalamazoo		State: MI	ZIP Code: 49007
Phone: 269-381-8888	Email: cont	act@nationwideregulatorycompllance.com	Fax: 269-381-4855
Gross Receipts Mailings			
Name & Title: Amanda Gucich,	Senior Compl	lance Specialist	
Address: 107 W Michigan Ave, 4	th Floor		
City: Kalamazoo		State: MI	ZIP Code: 49007
Phone: 269-381-8888	Email: con	tact@nationwideregulatorycompliance.com	ax: 269-381-4855
Lifeline Contact			
Name & Title: n/a			
Address:			
City:		State:	ZIP Code:
Phone:	Email:		Fax:

FORM PREPARER INFORMATION				
This form was completed by: Amanda Gucich				
Signature:				
Title: Serior Compliance Specialist	Date: 06/16/20			

RETURN COMPLETED FORM TO:

Public Service Commission of SC Docketing Department 101 Executive Center Drive, Suite 100 Columbia, SC 29210 Office of Regulatory Staff

AND Attn. Kari Munn
1401 Main Street, Suite 800
Columbia, SC 29201